LAND DEVELOPMENT PERMIT

LIME TOWNSHIP

PLANNING & ZONING 10 CIVIC CENTER PLAZA

PO Box 3368 Mankato, MN 56002

Phone: (507) 387-8620 Fax: (507) 388-7530

Applicant Signature

PERMIT NUMBER

When signed and stamped, this constitutes a valid permit.

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PERMITS REQUIRED IN CONJUNCTION WITH THIS APPLICATION:

Septic _

Other See attached

| OWNER | | .,,,,,,, | LEGAL DESCRIPTION |
|--|---|---|-------------------------------------|
| CONTRACTOR | | | ALLER |
| TYPE OF LAND DEVELOPMENT | | l l | |
| ZONING | SETBACKS | SETBACKS (CONT'D) | VARIANCE (TYPE & DATE APPROVED) |
| SIZE OF | | GARAGE SIZE | |
| NO, OF STORIES | | | _ |
| PROPERTY AREA | | | |
| LOT COVERAGE | | | |
| TOTAL SQ. FEET | | | |
| This permit shall be void 120 days afte. This permit must be accompanied by permit Card must be posted conspicue. Development activity may not begin until | ayment and a complete set of plans. usly on job site during construction. | | is permit. |
| Approved: Planning & Zoning Official | | Approved: County Sanita | rian |
| ACKNOWLEDGMENT AND SIGNATU | | ents upon all penalties of ime Township Ordinance, | law, that all statements herein are |

New Well _

Well Sealing